

INSTRUCTIONS FOR COMPLETING PROOF OF CLAIM FORM
AGAINST
UNIVERSAL CARE OF TENNESSEE, INC.

Claims for medical services provided July 1, 2001 through April 11, 2002 dates of Provider service ("Pre Claims")

Any additional payment of these Pre Claims will be made under the liquidation proceedings based on the available assets at distribution.

- Step 1 Review the Preliminary Liquidation Advice to be provided by the Liquidation during January 2004 and determine if all unpaid claims are included.
- Step 2 If all unpaid claims are included in the analysis and you agree with the payment calculation, then sign and date the Acceptance attached to the Preliminary Liquidation Advice and return the Acceptance to the Liquidation. Chancery Court must approve any distribution of net assets of Universal in advance.
- Step 3 If a claim does not appear on the Preliminary Liquidation Advice provided by the Liquidation, then complete and submit a Proof of Claim form for all **Pre Claims**.
- Step 4 If a claim appears on the Preliminary Liquidation Advice but you disagree with the denial or payment calculation, then complete and submit a Proof of Claim form.
- Step 5 **To aid in the processing and payment of a submitted claim, you should include a detailed explanation as to why you believe the claim(s) paid or denied incorrectly.** Be sure to include proof of timely filing if claim was previously denied for exceeding submission time limit or a copy of member's primary insurance plan EOB is Universal is a secondary payor.

All Proofs of Claims must be received by the Liquidation no later than June 15, 2004, 4:30 PM CST at either of the addresses listed on the front of the Proof of Claim.

Claims for medical services provided April 12, 2002 through May 31, 2003 dates of Provider service ("Post Claims")

- Step 1 **If all submitted claims have been processed and paid correctly, do nothing further.**
- Step 2 If a Post claim has not been processed on a remittance advice, submit it for processing **before** March 15, 2004 **without** a Proof of Claim, even if previously submitted.
- Step 3 After you receive notice from the Liquidation that all Post claims have been processed, if the provider records reflect:
1. there was an inappropriate denial of a Post claim,
 2. there was a payment miscalculation of a Post claim, or
 3. a Post claim has been omitted,
- complete and submit the attached Proof of Claim form.
- Step 4 **To aid in the processing of these claims, you should submit a detailed explanation as to why you believe the claim(s) paid or denied incorrectly.** Be sure to include proof of timely filing if claim was previously denied for exceeding submission time limit or a copy of member's primary insurance plan EOB is Universal is a secondary payor.

All Proofs of Claims must be received by the Liquidation no later than June 15, 2004, 4:30 PM CST at either of the addresses listed on the front of the Proof of Claim.

Other Creditors

- Step 1 Determine if any goods or services provided were (1) not paid, or (2) you disagree with the payment calculation (overpayment or underpayment).
- Step 2 Complete and submit the attached Proof of Claim form no later than June 15, 2004.
- Step 3 Claims that have been processed correctly should not be submitted in the Proof of Claim process.
- Step 4 **To aid in the processing of these claims, you should submit a detailed explanation as to why you believe the claim(s) paid or denied incorrectly.**

All Proofs of Claims must be received by the Liquidation no later than June 15, 2004, 4:30 PM CST at either of the addresses listed on the front of the Proof of Claim.

See back of page for further instructions

Item	Specific Instructions for Proof of Claim
1	State party to whom payment should be made.
2	Provide address to which payment should be made. If this address changes after submission of the Proof of Claim, a revised Proof of Claim must be submitted, indicating the change.
3	State claimant's telephone number where they can be reached from 8am-5pm CST, Monday through Friday. Telephone numbers should reach persons familiar with the filing of the Proof of Claim.
4	Provide email address where Liquidation may communicate with claimant. If claimant does not have access to email, then list a fax number.
5	Provide Federal Tax Identification number of party listed in Item #1.
6	Provide Universal assigned provider number (may be found on check remit)
7	Check appropriate box(es) to describe type of Claimant. Check the appropriate box for whether the claim is for <u>Pre</u> (July 1, 2001 through April 11, 2002) or <u>Post</u> (April 12, 2002 through May 31, 2003)
8	Explain why you are filing the Proof of Claim. The explanation should be thorough enough that the liquidation can understand why the Proof of Claim is being filed.
9	Print the name of the person executing the claim on behalf of the claimant.
10	Sign the Proof of Claim.
11	Have the Proof of Claim notarized .
	Submit the Proof of Claim after completing all information to an address listed below. The Proof of Claim must be received by the Liquidator no later than 4:30 PM CST on June 15, 2004.

CLAIM DOCUMENTATION AND W-9 FORM MUST BE ATTACHED TO THIS PROOF OF CLAIM. Claims will not be processed without claim documentation and a W-9 form.

Appropriate medical services claim documentation includes UB92, HCFA 1500, or ADA Dental Claim Form(s).

Appropriate Creditor claim documentation includes copy of original invoice, purchase order or contract.

If additional claims are identified, you may submit additional Proof of Claim forms. However, each Proof of Claim must have attached a separate W-9 form and claim documentation, and **MUST NOT** include duplicate claims submitted with a previous Proof of Claim.

**THE CHANCERY COURT OF DAVIDSON COUNTY, TENNESSEE
HAS ESTABLISHED A DEADLINE THAT ALL PROOF OF CLAIM
FORMS MUST BE RECEIVED BY THE LIQUIDATION**

NO LATER THAN

4:30 p.m. CST June 15, 2004 at either of the following

Universal Care of Tennessee in Liquidation
PO Box 282480
Nashville, Tennessee 37228

Universal Care of Tennessee in Liquidation
230 Great Circle Road, Suite 234
Nashville, Tennessee 37228

Inquiries concerning status of liquidation may be directed by

- email to questions@uctliquidation.com or
- calling (615) 277-0700

Additional information can be obtained on the Internet at;
www.state.tn.us/commerce/tenncare/liquidations/universal/index.html or www.uctliquidation.com